FORM B10 (Official Form 10) (Rev. 4/98)		andromana and an angle of the control of the contro	
United States Bankruptcy Court SOUTHERN DISTRICT OF TEXAS P.O.Box (Houston Division)			
Name of Debtors**	Case Number		
Stage Stores, Inc., a Delaware corporation Specialty Retailers, Inc., a Texas corporation Specialty Retailers, Inc. (NV), a Nevada corporation	00-35078-H2-11 00-35079-H2-11 00-35080-H2-11	788-4787 Creditor ID#:	
*place an "x" beside the name of the Debtor you are filing a claim against			
Name of Creditor (The person or other entity to whom the debtor owes money or property):	Check box if you are aware that anyone else a filed a proof of claim relating to your claim.		
Arandeli Corporation	Attach copy of statement giving particulars.	United States Benkruptcy Court Southern District of Texas FILED	
Name and address where notices should be sent: ***********************************	Check box if you have never received any notices from the bankruptcy court in this case	AUG 1 7 2000	
Box 68-9513 Milwaukee Wi 53268-9513	Check box if the address differs from the address on the envelope sent to you by the	Michael N. Milby, Clerk	
	Check here replaces		
Account or other number by which creditor identifies debtor:		viously filed claim, dated:	
1. Basis for Claim X Goods sold	Retiree benefits as defined in 11 l Wages, salaries, and compensation	on (Fill out below)	
Services performed Money loaned	Your \$\$#:		
Personal injury/wrongful death	Unpaid compensation for services		
Taxes Other	from to	(date)	
2. Date debt was incurred: 5 \\9\2000	3. If court judgment, date of	btained:	
4. Total Amount of Claim at Time Case Filed: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	te Item 5 or 6 below.	Attach itemized statement of all interest or	
5. Secured Claim.	6. Unsecured Priority Claim		
Check this box if your claim is secured by collateral (including a right of setoff).	Check this box if you have an unsecured priority claim Amount entitled to priority \$		
Rejet Description of Colleteral:	Specify the priority of the claim:		
Brief Description of Collateral: Real Estate Motor Vehicle Other All personal and intangible property of Debtor's Estate	Wages, salaries, or commissions (up to \$4,300)," earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3) Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).		
Value of Collateral: \$	 Up to \$1,950* of deposits toward purch personal, family, or household use - 1* Alimony, maintenance, or support owe 507(a)(7). 	hase, lease, or rental of property or services for 1 U.S.C. § 507(a)(6). ed to a spouse, former spouse, or child - 11 U.S.C.	
Amount of arrearage and other charges <u>at time case filed</u> included in secured claim, if any \$	 Taxes or penalties owed to government Other – Specify applicable paragraph 	of 11 U.S.C. § 507(a). 1/98 and every 3 years thereafter with respect to	
7 Greatts: The amount of all payments on time claim has been கான்ம் கான்ம்	educted for	- This Space is for Court Use Only	
the purpose of making this proof of claim. 8. Supporting Documents: Attach copies of supporting documents, suc	ch as promissorv		
notes, purchase orders, invoices, itemized statements of running accounts, concourt judgments, mortgages, security agreements, and evidence of perfection of DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available,	vtracts, of lien.		
plain. If the documents are voluminous, attach a summary. Ite-Stamped Copy: To receive an acknowledgment of the filing of your claim, close a stamped, self-addressed envelope and copy of this proof of claim.		00135	
Sign and print the name and title, if any, of the creditor or ot (attach copy of power of attorney, if any):			
Penalty for presenting fraudulent claim: Fine of up to \$500.0	יטט or impasonment for up to 5 years, or both	1, 18 ひ.さ.C. șș 152 8NG 3571.	

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10201 SOUTH MAIN HOUSTON, TX 77025 INVOICE NO.

014954

INVOICE DATE

05/19/00

P.O. NUMBER

SALESMAN

158 PLOTKIN, SPENCER

JOB NUMBER

0002054

Please remit to:

ARANDELL CORP.

BOX 88-9513

MILWAUKEE, WI 53288-9513

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DESCRIPTION	QUANTITY	U/M	UNIT PRICE	AMQUNI
DATA CONVERSION TRANSACTION MIN CHG DATA CONVERSION TRANSACTION MIN CHG DATA CONVERSION TRANSACTION MIN CHG DATA CONVERSION TRANSACTION MIN CHG DATA CONVERSION TRANSACTION MIN CHG FILE SELECT/PASS MAIL PLAN PREPARATION PHONE CALL ATTEMPTS TO A.O.'S SHIPPING & HANDLING - TAPES/REPORTS SPECIAL REPORTS (POST PROCESSING)	172297 5056 48172 18896 11930 887517 887872 1348 1		3.500 1.500 5.000 177.570 200.000	
CARTON PACK CATALOGS	3600	M	13.160	47.38
FREIGHT MAIL DROP SHIFMENT FREIGHT CHARGES				235.95
				13,119.37
SUB TOTAL				\$83,453.42
TERMS: NET 30 DAYS				
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YOTAL				#83,453.42

An interest charge of the maximum contract rate permitted by law, will be added to all past due accounts.

ALL APPLICABLE LOCAL AND STATE SALES TAXES TO BE PAID BY PURCHASER